ANNUAL REPORTS

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UNIVERSITY OF ALBERTA HOSPITAL

QUAECUMQUE VERA

FORTY-FOURTH ANNUAL REPORT

FOR THE YEAR ENDING DECEMBER 31, 1966

EDMONTON
ALBERTA

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UNIVERSITY OF ALBERTA HOSPITAL

EDMONTON, ALBERTA

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Dr. W. C. MacKenzie
Dr. R. S. Fraser
Dr. A. N. Brinsmead
Dr. B. Snell
Dr. G. Monckton
Dr. R. J. Johnston
Dr. R. W. Sherbaniuk
Dr. T. C. Wilson

REPORT OF THE EXECUTIVE DIRECTOR

DR. B. SNELL

During the year 1966 the University of Alberta Hospital continued in its roles as the main referral hospital for the northern part of the province and teaching hospital of the Faculty of Medicine of the University of Alberta. Its work in these areas expanded in volume and complexity during the year.

The detailed reports of the main divisions of the hospital follow. However I wish to highlight some of the activities and occurrences which I think will be of particular interest.

The long-term planning activities for the University of Alberta Health Sciences Centre were formalized in the creation of the Co-ordinating Committee for the Health Sciences Centre. The initial purpose of this committee is to bring together the resources of the University Hospital, the health science faculties and schools of the University of Alberta, and the Government of the Province of Alberta, so as to plan a health sciences centre which will offer the people of Alberta excellent care in all branches of the health field as well as effective educational programs for undergraduate and graduate students in the health professions. The present members of the committee represent the University Hospital Board and Administration, the Board of Governors and the Faculty of Medicine of the University of Alberta, and the Schools of Nursing and Rehabilitation Medicine of the University. Resource personnel from the Hospital and University also attend meetings. Until now the main effort of the committee has been directed towards physical planning of the Health Sciences Centre in close co-operation with the Project Director. However,it is hoped that in the future the committee's role will be expanded to include some influence in the operation of the total Health Sciences Centre.

A major new development during the year was the change in direction of the Department of Out-Patient and Emergency Services. The new roles of the department are reflected in its change of title to Department of Ambulatory Patient Care. The number of patients treated in the emergency service has steadily increased each year and it is evident that this service will form a major aspect of hospital activities in the future. Another change in the department will be the different accent in the case of out-patient clinics. In the past these served a dual purpose--the care of the indigent and medical education. Recent social legislation has reduced the need for the former and the needs of medical education would be more effectively satisfied by a cross-sectional group of patients organized as a family practice. During the next few years, therefore, we will see a Family Clinic replacing the present Out-patient Department to a considerable degree. The planning and organization of these changes and others in the expanding role of ambulatory services, will be carried out by the new Director of the Department, Dr. L. C. Grisdale.

The year 1966 was a difficult one because of the increasing shortage of professional nursing staff. Although this shortage is a continent-wide phenomenon, its effect on the University Hospital was acute and forced us to close beds towards the end of the year. A number of steps were taken to alleviate the shortage, including a redistribution of work, the planning of in-service educational programs, a review of personnel policies in the Department of Nursing and the hospital generally, and an aggressive recruiting campaign. However these are relatively long-term activities and their results will not begin to become evident until 1967.

The following department heads were appointed during the year:

Dr. L. C. Grisdale - Director of Ambulatory Patient Care

Miss Enid S. Wyness - Director of Social Service

Dr. J. G. Read - Planning Co-ordinator

Mr. R. Coombs - Assistant Business Administrator

Mr. R. W. Foreman - Assistant Planning Co-ordinator

The senior staff continued to carry an increasing work load and I would like to express to them my appreciation for their co-operation and the effective manner in which they handled their difficult tasks. I would also like to indicate my sincere appreciation to Dr. W. C. MacKenzie and the members of the Faculty of Medicine for their continued co-operation in integrating the related work of the hospital and the medical school, which has enabled the hospital staff to carry out their teaching functions more effectively.□

REPORT OF THE BUSINESS ADMINISTRATOR

MR. GEORGE C. SHERWOOD

In commencing the year 1966 the Hospital Board approved a budget forecasting total expenditures in the amount of $11,453,653.00. At the conclusion of the year the total of actual expenditures incurred amounted to $11,261,200.00. At the time of preparing this report it is possible to indicate that as the result of final settlement as determined by the Alberta Hospitalization Benefits Plan, the Hospital has been left with excess costs for the year's operation of $47,288.75. Since the inception of the Alberta Hospitalization Benefits Plan in April 1958, this is the second year in which the total operating costs of the University of Alberta Hospital have not been fully met by the Plan. An amount of $6,096.11 remains outstanding from the hospital's operation for the year 1964.

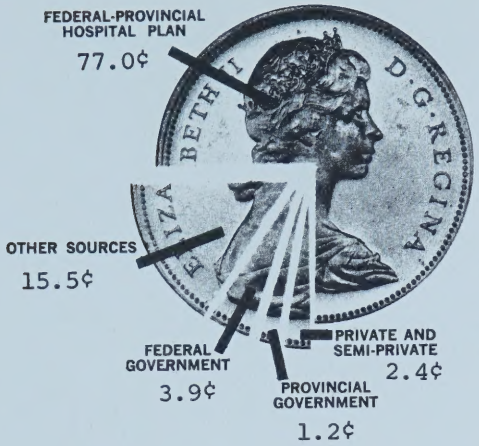
It should be regarded as remarkable that this institution with its many and varied activities - which have no reasonable comparison with any other hospital within the Province of Alberta - has been able to maintain its total operational costs within the limits determined by the general level of costs occurring in all other hospitals within the province. In several instances very unique services provided by this hospital have been partially recognized in a manner that the hospital is reimbursed for its direct expenditures in these areas. The list is far from all-inclusive however and the hospital continues to absorb in its general operational budget the indirect expenses which are related to these activities as well as the total cost of many other areas of special services, educational and research activities which are essentially unique to the University of Alberta Hospital. An excellent example of this is that during the year 1966 the University Hospital expended a total of $62,448.08 for special prosthetic appliances such as heart valves and pacemakers, artery grafts and other special supply items used extensively in cardiac surgical procedures. It would not be correct to suggest that other hospitals are not purchasing some of these kinds of supply items but it is reasonable to indicate that they are not being used in other hospitals to any degree comparable to the University Hospital and therefore their costs are not reflected in the ceiling limits determined by the Alberta Hospitalization Benefits Plan.

The University Hospital is finding some of the funds required to finance its operation in areas of unique activity through profits realized from an extremely high level of out-patient services provided through various clinical service departments. It is interesting to note that on a revenue basis , this hospital is providing approximately one-quarter of all out-patient services provided by hospitals throughout the entire province of Alberta and in excess of fifty per cent of the total provided by the province's three largest hospitals.

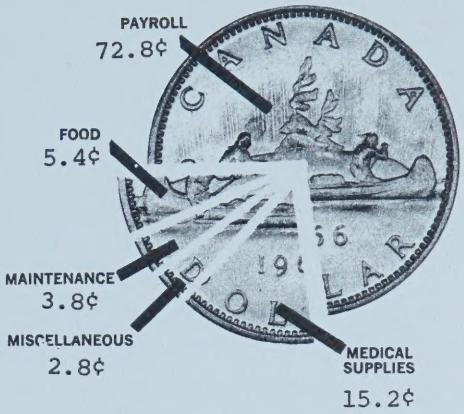
With its continually accelerating role as a special service, teaching and research institution it seems imperative to indicate at this time, that, probably commencing with the year 1966, the University of Alberta Hospital can no longer be expected to finance its operation completely within the framework of the Alberta Hospitalization Benefits Plan. Other means of support must become available to this Hospital. The concept of its role in the developing University of Alberta Health Sciences Centre - a role which it is already playing to a very large degree - dictates this as an absolute necessity.□

FINANCES

WHERE OUR DOLLAR COMES FROM



WHERE OUR DOLLAR GOES

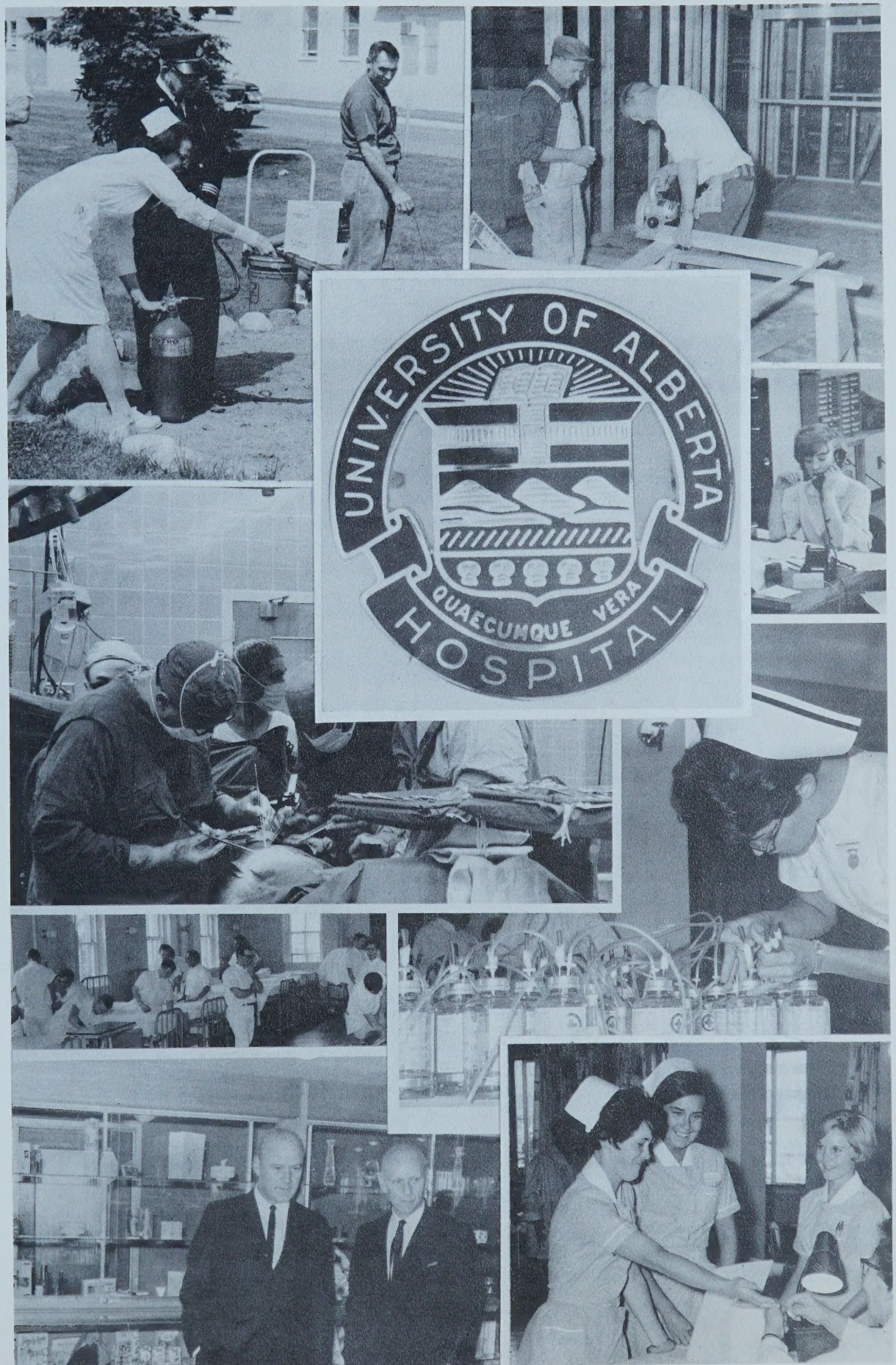


	1966		1965	
OUR MAIN SOURCES OF INCOME	**DOLLARS**	**%**	**DOLLARS**	**%**
Alberta Hospitalization Benefits Plan	8,665,000.00	76.95	7,370,000.00	75.40
Federal Government on behalf of D.V.A. and D.N.D. Patients	440,600.00	3.91	441,500.00	4.51
Private and Semi-Private differential	273,500.00	2.43	266,400.00	2.73
Provincial Government—direct hospitalization payments	134,000.00	1.19	138,400.00	1.42
Other Sources—W.C.B., Blue Cross, Private Insurance, Non-Residents	1,748,100.00	15.52	1,557,700.00	15.94
	11,261,200.00	100.00	9,774,000.00	100.00
OUR PRINCIPAL EXPENSES				
Payroll	8,193,200.00	72.76	7,154,100.00	73.20
Food & Dietary Supplies	611,000.00	5.43	561,000.00	5.74
Medical Supplies	1,707,400.00	15.16	1,405,300.00	14.38
Plant Maintenance—excluding depreciatic	433,900.00	3.85	351,600.00	3.60
All Others	315,700.00	2.80	302,000.00	3.08
	11,261,200.00	100.00	9,774,000.00	100.00
OUR PRINCIPAL ASSETS				
Cash on Hand and in Bank	550,167.00			
Inventories	457,700.00			
Accounts Receivable—less provision for doubtful accounts	1,366,700.00			
Plant Funds—including land, buildings, equipment & receivables	20,787,436.00			
CURRENT LIABILITIES				
Trade Accounts—Salaries, Wages Due	413,400.00			
Deferred Income	622,500.00			
SOURCES OF CAPITAL FUNDS				
Province of Alberta	11,053,700.00			
Federal Provincial Plan	6,881,000.00			
University Hospital	1,615,000.00			
Federal Government	687,000.00			
Debenture Debt	550,800.00			

1966 ANNUAL REPORT

PERSONNEL MOVEMENT

	Establishment 1966		Separations 1966		
	F/T	P/T	F/T	Temp.	P/T
Administration	91	6	33	11	16
Nursing Officers & Chg. Nurses	151	1	42	4	5
Graduate Nurses	312	10	220	31	61
Certified Nursing Aides	158	-	70	4	-
Ward Aides & Other Aides	103	-	36	5	-
Nursing Orderlies	108	1	53	20	6
Ward Clerks & Stenos.	34	3	6	-	2
Nurses' Res. & Interns Res.	26	5	3	2	-
Medical Records & Clerks	32	1	8	3	3
Medical Directors	1	7	1	-	-
Anaesthesia	4	-	2	-	-
Clin. Lab. & Research	130	15	80	14	3
Inhalation Therapy	6	1	1	-	-
Pharmacy	16	-	9	1	1
Orthopaedics	3	-	-	-	-
Opthalmology	1	-	-	-	-
Psychiatry	7	-	3	-	-
Rehabilitation	49	-	32	2	2
Medical Social Service	11	-	4	1	-
Radiology	49	-	39	2	3
Dietary	136	14	139	-	69
Housekeeping (Maids & Janitors)	145	-	134	110	-
Laundry & Linen Service	80	-	39	11	28
Maintenance	46	1	5	8	-
	1,699	65	959	229	199


UNIVERSITY OF ALBERTA
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HOSPITAL

MEDICAL

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Dr. R.S. Fraser - Cardiology
Dr. B.J. Sproule - Chest Disease & Pulmonary Function
Dr. P.L. Rentiers - Dermatology
Dr. L.E. McLeod - Endocrinology & Metabolism
Dr. D.R. Wilson - Internal Medicine
Dr. G. Monckton - Neurology

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Dr. A.M. Edwards
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Dr. H. Jacobs
Dr. Simon Lee
Dr. L.E. McLeod
Dr. G. Monckton
Dr. P.L. Rentiers
Dr. F.B. Rodman
Dr. R.E. Rossall
Dr. J.W. Scott
Dr. R.W. Sherbaniuk
Dr. B.J. Sproule
Dr. R.K. Thomson
Dr. R.H. Wensel
Dr. D.R. Wilson

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Dr. R.H. Whiting
Dr. M.K. Young

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Dr. G.H. Ball (Public Health)
Dr. A. Brinsmead (Admin. D.V.A.)
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Dr. J.C. McPherson (Tuberculosis)
Dr. J.W. Pearce (Physiology)
Dr. E.S. Orford-Smith (Public Health)
Dr. H.H. Stephens (Tuberculosis)

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Dr. P.H. Sprague (Medicine)

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Dr. O. Rostrup - Orthopaedic Surgery
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Dr. J.D.M. Alton - Plastic Surgery
Dr. J.C. Callaghan - Thoracic and Cardiac Surgery
Dr. J.O. Metcalfe - Urology

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Dr. W.C. MacKenzie
Dr. B. Michalyshyn
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Dr. C.S. Dafoe
Dr. C.A. Ross

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Dr. J.R. Huckell
Dr. D.C. Johnston
Dr. O. Rostrup
Dr. G.L. Wilson

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Dr. W.H. Lakey
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Dr. L. Stayura
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Dr. M. Tedeschini
Dr. P.F. Wilcock

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Dr. B.W. Mielke
Dr. T.K. Shnitka
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Dr. R.E. Bell - Haematology
Dr. F. Jackson - Microbiology

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Dr. D.I. Buchanan
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Dr. Mac. G. Strelioff
Dr. A.R. Urschel
Dr. R.S. Van Alstine

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Dr. J.W. Carmichael (Bacteriology)
Dr. H.B. Collier (Biochemistry)
Dr. E.E. Daniel (Pharmacology)
Dr. D.M. Fawcett (Medicine)
Dr. C. Lee (Paediatrics)
Dr. O.E.Z. Morgante (Virology)
Dr. D.B. Scott (Radiology)
Dr. R.S. Smith (Neurophysiologist)
Dr. A.G. Stewart (Biochemistry)
Dr. S. Usiskin (Consultant Physicist)
Dr. T.E. Weckowicz (Psychiatry)

MEDICAL DEPARTMENTS

DEPARTMENT OF MEDICINE

Dr. D. R. Wilson - Director

The pre-centennial year of 1966 will go down in the record as the year of feverish planning for the future. Much of the energy and time of the department was absorbed in the detailed planning of the Clinical Sciences Building and in the preliminary planning of the Centennial Hospital program. Until such time as these facilities become available, appreciable expansion in facilities and activities of the department becomes increasingly difficult.

With respect to staff changes during the past year, we welcome back to the department Dr. Adam Little who has assumed acting direction of the Division of Clinical Haematology in addition to his new duties with the faculty as Director of the Department of Continuing Medical Education. Two further members of staff have been appointed. Dr. R. F. Taylor shares an appointment in Medicine with Dr. Grisdale's new Department of Ambulatory Patient Care. During the past year he has made a valuable contribution in the development of the coronary care unit and in establishing a training program for the training of health personnel in this field. Dr. Peter Crockford has joined the staff in the Division of Endocrinology and Metabolism. His major sphere of interest will be in the field of diabetic research.

In the Division of Cardiology there has been an increase in the number of investigative procedures carried out and in the introduction of new and more complex methods for assessing cardiac functions. Methods for visualizing the patency of coronary arteries have been developed which greatly extend our present knowledge of patients known to be afflicted with coronary artery disease. Based on studies of this kind, surgical procedures for the relief of coronary insufficiency have been introduced on an increasing basis.

Since Dr. Fraser's return from a year of study in the field of computing science there are important changes being developed in the field of electrocardiography. Various programs for computer interpretation of electrocardiograms are being studied for early introduction in this hospital. Through the support from the Alberta Heart Foundation for the next three years it will now be possible to carry out detailed reviews of all aspects of congenital and acquired heart disease by methods not previously available to us.

In the Division of Endocrinology and Metabolism, with the arrival of Dr. Crockford, new research projects have been established in the field of radio-immuno-assay measurement of insulin in normal and diabetic patients, and new laboratory techniques have been introduced for the measurement of growth hormone and glucagon. The service load in the renal unit has increased to a very major degree. Financial support has been received from the Department of Health for the provision of a centralized and much larger care facility for patients with chronic renal disease. Provision for the addition of professional and technical personnel for the unit has also been arranged. Associated with the service program to patients, there is an on-going research component.

In the Division of Pulmonary Disease, research studies in the mechanics of breathing and on blood gas disturbances in a variety of diseases, continues under the direction of Dr. B. J. Sproule. In collaboration with Dr. Simon Lee, a study of the effects of digitalis on vascular resistance has been carried out by Dr. P. Lynne-Davies. The activity of the Department of Inhalation Therapy has continued to increase necessitating a further augmentation of staff.

During the past year a Division of Gastroenterology has been created in the department. Dr. R. W. Sherbaniuk has been appointed as acting head of this division. An out-patient clinic in this sub-specialty has been developed.

In the field of graduate medical education, our residency training program has been evaluated recently by a Royal College of Physicians and Surgeons' survey team. The conclusions reached by the surveyors would indicate that our program is amoung the best in Canada. The growing number of superior applicants to the program is encouraging and would lend support to the observation of the graduate training survey.□

DEPARTMENT OF SURGERY

Dr. R. A. Macbeth - Director

In 1966 we were extremely fortunate in attracting four new general surgeons to our staff; Dr. P. A. Salmon from the University of Minnesota; Dr. O. G. Thurston from the M. D. Anderson Hospital and Tumor Institute, Houston, Texas; Dr. W. W. Yakimets and Dr. F. W. Turner from our own hospital training program. All bring a special competence in some area of patient care and in addition are fine teachers and surgical scientists. Dr. L. P. Sterns from the University of Minnesota was added to our much overworked "open Heart team" in the Division of Thoracic and Cardiovascular Surgery, while Dr. R. W. Mallen from Barnes Hospital, St. Louis, upgraded our ability to provide exemplary patient care in the Division of Rhino-Oto-Laryngology by returning to the hospital after extensive training which included advanced major surgical techniques relative to the surgery of the larynx. Dr. B. K. A. Weir from the Montreal Neurological Institute also joined our staff in the Division of Neurosurgery and brings with him particular competence in advanced techniques of neurosurgical research. The department was particularly fortunate too in gaining Dr. R. S. Smith as a Research Associate. Dr. Smith, in addition to medical qualification, has a doctorate in Neurophysiology from the Karolinska Institute in Stockholm. As Medical Research Council of Canada Scholar his activities in the division of Neurosurgery are centred in the Surgical-Medical Research Institute but his presence will be invaluable to the scientific development of the hospital.

During the year 1966 discharges from all surgical divisions totalled 11,318, an increase of 4.7% over the discharges of the previous year. This must be assumed to be due largely to the effective operation of the so-called "ward system". The operating room has also shown an increase in number of operations performed. The total number of surgical operations in 1966 was 11,730, an increase of 2.6% over the 1965 figure. The total hours of operating amounted to 15,485, an increase of 4.2% over the figure of the preceding year. The total cystoscopic procedures numbered 7,092 during the year which consitiutes a phenomenal 12,6% increase over the 1965 figure.

In the Division of Orthopaedic Surgery the Juvenile Amputee Clinic, with two clinics a week, continues to grow and the total number registered has increased 20% over the preceding year. The Hand Clinic also continues to be active. The Polio Fund of the Alberta Royal Canadian Legion provided Research Fellowships that are so important to the development and continuation of orthopaedic research at this centre.

The Divisions of Neurosurgery, Thoracic and Cardiovascular Surgery, Otolaryngology, Plastic Surgery, and General Surgery report another active year.

In the Division of Urology, although basic research in relation to renal transplantation continues, human renal transplantation was not embarked upon in 1966. However, with the co-operation of Dr. L. E. McLeod and his excellent chronic dialysis unit, we are prepared for and anticipate the initiation of our human renal transplantation program early in 1967.

The Eye Bank in the Division of Ophthalmology, established two years ago, had been active although the number of patients treated has been limited by a lack of availability of donor eyes.□

DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY

Dr. R. P. Beck - Director

The number of deliveries has dropped from 2247 in 1965 to 2221 in 1966. There was an increase in the perinatal death rate for infants weighing 1000 grams and over from 14.58 in 1965 to 19.75 in 1966. The perinatal death rate for infants 500 grams and over increased from 21.06 in 1965 to 25.42 in 1966. The reason for the increase in the perinatal death rates was a marked increase in the number of stillbirths especially in premature and mature infants. There were 18 stillbirths in 1965 (500 grams and over) and 28 in 1966. About one-third of these stillbirths were cases referred to members of our staff with death in utero having already occurred. There were two cases of impacted transverse lie and two intra-uterine deaths from Rh haemolytic disease, for instance, in this latter category. The number of neonatal deaths has dropped from 30 in 1965 to 29 in 1966, and a greater percentage of these neonatal deaths was in immature and premature infants in 1966 as compared to 1965. The caesarean section rate in 1966 was 4.3%; the maternal morbidity in 1966 was 1.9%, and there was no maternal mortality.

There was a record increase in the number of gynaecological admissions during 1966; 1803 as compared to 1728 in 1965. The total number of operative procedures increase from 1768 in 1965 to 1816 in 1966. The wound infection rate was 1.3% on the gynaecological service, and there were only six other serious post-operative complications in 535 major abdoninal or vaginal operative procedures.□

Obstetrics

Year	Deliveries	Total Babies	Multiple Births
1962	2342	2362	20 pairs of twins
1963	2324	2352	28 pairs of twins
1964	2272	2298	24 pairs of twins 1 set of triplets
1965	2247	2279	30 pairs of twins 1 set of triplets
1966	2221	2242	21 pairs of twins

Gynaecology

Year	Admissions	Surgery
1962	1651	1600
1963	1892	1744
1964	2017	1753
1965	1728	1768
1966	1803	1816

DEPARTMENT OF PAEDIATRICS

Dr. J. K. Martin - Director

As will be seen from the statistics there is little change in patient volume. For purposes of resident training the number of out-patient visits is inadequate at this hospital. It is hoped this can be corrected in the plans for the new Ambulatory Care Unit.

During the year we have welcomed to the part-time staff Dr. S. J. Tkachyk who is in paediatric practice. Dr. W. C. Taylor has taken a year's sabbatical leave. He is writing a book on the Alberta Perinatal Studies and visiting twenty-two medical centres around the world.

Classroom instruction has continued under the supervision of the Edmonton Public School Board. Our recreational program for the children remains active.□

Cleft Palate Clinic	
Total number of patients seen -	74
Total number of treatments -	117
Pre-School Deaf Clinic	
Total number of patients seen -	121
Total number of treatments	179
Paediatric Wards	
Total of hospital admissions -	3,727
Average bed occupancy -	70%
Paediatric Out-Patients	
Total patient visits -	3,452
Total new patients -	597
Total number of admissions -	215

DEPARTMENT OF PSYCHIATRY

Dr. K. A. Yonge - Director

In April of this year we were able to occupy the completely renovated areas for Psychiatry (Stations 14, 23, and 24). The renovations have improved our treatment facilities in many respects and have thus provided decidedly improved patient care. The renovations necessitated a temporary restriction in the bed capacity of the department. By April we were able to resume our allotted bed capacity of 59 patients--8 in the children's unit. Despite the lengthy curtailment of our bed capacity we were able to maintain our total service of 965 in-patients treated; only slightly less than the preceding year. The average length of stay was reduced to 17 days as against the previous year of 19.7. The total number of electro-convulsive treatments was 1,437; not much less than the previous year. The Unit for Emotionally Disturbed Children, despite the necessary curtailment of the service because of the renovation program, cared for a total of 67 patients--the same as last year--with an average length of stay of 29.5 days. In the Out-Patient Department the number of investigative and treatment interviews increase considerably over the previous year to 792.

Through the psychological services a total of 497 patients underwent tests by psychologists. Apart from the diagnostic testing, a total of 197 hours were spent in therapeutic interviewing.

Dr. Charles Hellon joined us in January and Dr. Hugh Bacon in July; both on the full-time teaching staff as clinical instructors.

For the major research activity in our department, we were again fortunate in obtaining financial support through a National Health Grant. Mr. Paul Unongo and Mr. Joseph Eisenberg, as psychologists, joined Dr. T. E. Weckowicz in the major research project furthering the studies of depressive states.□

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION

Dr. J. Jimenez - Clinical Director

In July, 1966, Dr. M. T. F. Carpendale, who had been Director of the department since 1956, resigned his position in order to fulfill his long-standing desires to dedicate himself full time to research. He went to the New York State Rehabilitation Hospital as Director of Research, together with a teaching position at Columbia University.

A new Chair of Physical Medicine and Rehabilitation has been created to include the School of Rehabilitation Medicine and the Department. We are sure that with this association the communication between the two units will greatly improve and better quality teaching will result. Dr. J. B. Redford has been appointed to the Chair and will begin his duties in April, 1967. Dr. Redford, a native of Victoria and a graduate from the University of Toronto, is coming back to Canada after ten years of living in the U.S.A.; the last four as Chairman Professor of Physical Medicine and Rehabilitation at the Richmond Medical College in Virginia.

Dr. J. Jimenez has been appointed clinical Director of the department. Dr. J. Easton has continued to organize the teaching program for the residents and staff therapists.□

	1965	1966
Physio and Hydro		
Total number of treatments given -	100,166	82,532
Total number of patients treated -	6,626	7,065
Remedial Exercise		
Total number of treatments given -	24,490	30,244
Total number of patients treated -	3,852	3,885
Occupational Therapy		
Total number of treatments given -	19,986	16,149
Total number of patients treated	2,422	2,244
Combined Totals		
Total number of treatments given -	144,642	128,925
Total number of patients treated -	12,900	13,141
Total E.M.G. Procedures	396	454

DEPARTMENT OF RADIOLOGY

Dr. F. McConnell - Director

During the year Dr. L. B. Costopoulos became a full member of the radiological staff. Dr. L. Hsu left in June to join a private medical clinic in Regina.

Mrs. J. Doty was appointed our Senior Clerk and under her direction an extensive reorganization of the departmental filing areas was undertaken.

A second X-Omat automatic film processing unit was installed and under the guidance of Mr. W. R. Hansen, Chief Technician, it was converted to a high-speed, "double-capacity" operation. This is one of the first units to be operated in this way in Western Canada.

A "rapid report" service has been introduced with immediate interpretation of examinations available on request. This has been particularly useful for cases referred from the Emergency Department.

Mr. Derek Hanson, R.T., joined our staff and has been given responsibility for the radiological technician training course. During the year nine of our student technicians completed their course and obtained the R.T. on examination.□

	1965	1966	
Number of patients examined -	45,559	52,836	+16%
Number of examinations -	57,255	60,340	+ 5%
Fluoroscopic examinations -	5,070	6,029	+19%
Arteriograms -	878	687	-21%
Catheter arteriograms -	120	182	+51%
Isotope Scans -	536	1,308	+142%

DEPARTMENT OF ANAESTHESIA

Dr. E. A. Gain - Director

There has been the usual small increase in work done but this work load will be relatively static, as predicted a few years ago, until more surgical beds become available.

During the year we obtained the services of Dr.M.Rensaa and Dr. H. Haynes. Dr. J. D. M. Miller also joined the staff and has been devoting most of his time to clinical research with Dr. J. W. R. McIntyre, doing only part-time clinical practise during 1966-67.

The department, in co-operation with the Department of Continuing Medical Education, presented its first Refresher Course for General Practitioners. The course was very successful and it is anticipated that it will be presented annually.□

	1962	1963	1964	1965	1966	Increase over 1965
Total anaesthetics administered	9,746	10,798	11,665	12,051	12,363	312
Elective	8,286	9,151	9,956	10,171	10,404	233
Emergent	1,460	1,647	1,709	1,880	1,959	79
Average anaesthetic time per case (minutes)	78.0	75.6	77.6	75.2	76.3	

DEPARTMENT OF PATHOLOGY

Dr. J. W. Macgregor - Director

During the year 1966 there was a significant increase in the number of surgical pathological specimens examined. There was a slight decrease in the number of autopsy examinations and in frozen section diagnoses made in the operating room.

Surgical Pathology	1965	1966
Number of cases -	7,936	8,402
Number of malignant cases -	826	960
Percent malignant tumors -	10.4	12.3

Frozen Section Diagnosis - Members of the professional staff were in the operating room on over 400 occasions during the year for the purpose of immediate diagnosis by the frozen section technique using the Cryostat. The use of this instrument has extended the field of frozen section diagnosis.

Autopsy Pathology - Autopsy examinations were performed in 401 hospital deaths (66% of total deaths). Autopsy studies provide an excellent source of teaching material for both undergraduate and graduate students, and provide valuable information to clinicians in following case studies to completion.

Other Activities - Throughout the teaching year members of the staff took part in clinico-pathological conferences, neuropathology rounds, gynaecology rounds, etc. Case studies and pathology discussions on selected topics are presented on Saturday mornings for residents in training, and for staff members on several occasions during the year. A staff member is also present at surgical complications meetings each month. All medical and surgical deaths occurring in the hospital are reviewed.□

DEPARTMENT OF CLINICAL LABORATORY SERVICES

Dr. R. E. Bell - Director

The statistical analysis of the work done in the department shows a continuation of the upward trend. Taking an average of the past two years, the rate of increase is approximately 28% in chemistry, 7% in haematology, and 6% in blood bank. On the basis of the past year, units of work for procurement and handling of specimens has almost doubled,including a substantial increase in handling bacteriology specimens. Referred out-patient work has increased by 16%. The overall increase in laboratory work, as reflected in work units, is 30% per year over the past two years. During the same period there was a total staff increase, including technical and other categories, of less than 6% per year.

The continuing increase in workload, automation, and more sophisticated equipment,have put more and more demands on the supervisory staff and additional senior staff are required to maintain a high standard of work. During the year we had several periods with acute staff shortages requiring some reduction in service. This is a recurring problem and increased training programs, more automation, and more use of laboratory assistants all contribute to its solution.

Dr. Francis Jackson,who assumed his appointment as Head of the University Department of Microbiology, was appointed Head of the Division of Microbiology in the department. Dr. Jackson comes with a wide experience in academic and hospital bacteriology teaching and research. Dr. Harold Bell was appointed Director of the Division of Medical Laboratory Science of the Department of Pathology.

In the Division of Clinical Chemistry,a study supported by the Special Services and Research Committee was undertaken by Dr. H. E. Bell to dtermine the effectiveness of screening patients on admission for unsuspected disease using the three biochemical tests--blood sugar, plasma urea, and uric acid. Results of this study, which will be reported to the staff early next year, showed that between 3 to 7% of patients have abnormally high levels of these substances in their blood that would not be suspected otherwise. While all of these abnormalities will not be significant in respect to the patient's present or future health, indications are that a sufficiently large proportion are important enough to warrant the introduction of a screening of this type on a routine basis.

An amino acid analyzer and a fluorometric analyzer were provided through a National Health Grand to Dr. J. K. Martin, Director of Paediatrics, and Dr. D. J. Campbell. These will provide the means of screening newborns for the disorder phenylketonuria to make possible their early dietary treatment to prevent mental deterioration. The equipment also provides the capacity to study these disorders in more detail and to screen for other similar abnormalities involving other amino acids.

Further steps towards automation were taken. About 70% of the tests now done are automated so far as the technical procedure is concerned. This has resulted in major savings, particularly in technical time. The next step in this automation process is to have the patient data put into the system in such a way that it can be automatically matched up with the data coming from the machines by printout to provide the report with a substantial further saving in time and improved accuracy.

In the blood bank the number of crossmatches increased from 16,970 to 18,459, with slightly less blood received from the Red Cross. This was accomplished by doing more crossmatches on each bottle. The blood transfusion unit participated in a joint Western Canada project to obtain plasma for the preventive treatment of haemolytic (Rh) disease of the newborn. The second phase of this program, using the anti-Rh preparation as a preventive treatment, will start in 1967.

The teaching program in Medical Laboratory Technology was considerably extended. Sixteen third-year students in the new Medical Laboratory Science program at the University of Alberta entered their twelve-month apprenticeship in May. Eight second-year students in the hospital N.A.I.T. program came into the department during the year and five students were enrolled in the special programs, including blood banking.□

	1964 Units	1965 Units	1966 Units
Clinical Chemistry	557,120	690,745	875,154
Haematology	350,276	321,652	397,730
Blood Bank and Immunohaematology	141,243	151,005	159,314
E. C. G.	37,964	44,584	49,804
E. E. G.	31,332	32,612	34,614
Other	20,243	183,910	302,826
Total Units	1,138,178	1,424,508	1,819,442
Radioisotope Laboratory - Total Diagnostic Procedues	27,006	35,497	69,506
Bacteriology and Serology	393,788	458,750	528,935
Blood Transfusion (No.bottle used)	9,606	8,795	9,106

DEPARTMENT OF DENTISTRY

Dr. H. R. MacLean - Director

An appreciable amount of treatment is being rendered by undergraduate students from the Faculty of Dentistry on "block assignments". The department operated for several months without the services of a dental intern. This has a marked effect on the number of operations performed. The department will not be able to operate in an efficient manner until one of more licensed dentists, together with a resident dental intern, are available to perform a full-time service on a year-round basis. A research project, "The Study of Tooth Eruption in Children from Infancy to Three Years", was completed in December, 1966. This project was conducted under the support of a National Health and Welfare Grant.

The greater part of the services listed below were rendered to children with chronic illness. Preoperative examination and treatment to cardiac cases has also been given considerable emphasis. The co-operation of the Department of Anaesthesiology is recognized.

Total number of patient visits -	860
Total number of patients treated -	576
Oral surgery cases under local anaesthetic -	120
Consultations -	375
Examinations -	428
Prophylaxis -	62
Topical Fluoride -	38
Intra-oral x-ray exposures -	3,034
Dental restorations -	347
Periodontal treatment -	25
Orthodontia appliances -	2
Orthodontia and denture adjustments -	13
Denture repairs -	10
Intra-oral impressions -	11
Miscellaneous treatments -	105
Restorative cases under general anaesthetic -	23
Oral surgery cases under general anaesthetic -	87

SPECIAL SERVICES AND RESEARCH COMMITTEE

Dr. W. C. MacKenzie

The year 1966 was one of increasing activity in Special Services and Research in the University of Alberta Hospital. The initial budget included thirty-four separate research projects, and during the course of the year an additional thirty-three applications were considered by the committee. The committee continues to provide funds to get projects "off the ground" on condition that the grantee would be making application elsewhere for future support of the project. Support from the Special Services Committee is normally provided only until such time as the grantee could be expected to have funds available from an outside granting agency. Support for personnel, equipment, and interim operating costs is considered.

All clinical departments are becoming more active in research, with thirty-two of the clinical staff actively involved in research projects being conducted in the hospital. This is in addition to those who are carrying out basic research in the Surgical-Medical Research Institute. Emphasis is being placed on the research interest and potential of those individuals under consideration as new members of staff, and it is obvious that the activities in research and development of special services will increase substantially in view of this policy. The major limiting factor at the present time is lack of suitable space and support for this activity.

Only a few of the new developments are mentioned here. Dr. Peter Crockford returned to the Department of Medicine after a prolonged period of postgraduate study and will continue his research in endocrinology, studying growth hormone, insulin, and other hormones. In the Division of Cardiology an acute coronary care program was developed in which 120 patients were monitored. An intensive program of education of medical staff and para-medical staff in the management of the acute coronary patient was undertaken. The Renal Unit activities have continued to increase and preliminary preparations have been made to embark on a program of renal transplantation in the coming year. The Department of Obstetrics and Gynaecology established a uninary stress incontinence unit, introducing new diagnostic and treatment techniques related to this problem and a program of research into the physiological mechanisms involved. An infertility clinic was also started in this department. The preliminary planning which culminated in the establishment of the shock team was carried out early in the year, and the many techniques required in the investigation of patients with this complication were developed. The Division of Ophthalmology has continued to work on blindness control, and the eye bank is now operating on a regular basis. A joint project, carried out between the Departments of Obstetrics and Gynaecology, Paediatrics, amd Clinical Laboratories, on the prevention of haemolytic disease of the newborn was started in the last year; the project being conducted together with other medical centres in the four western provinces.

The Special Services and Research Committee,as has been stated previously, has directed its attention to the initial support of new projects on the principle that, once a good project is under way other support will become available, primarily from national granting agencies. This policy has been successful in bringing to the institution substantial funds from elsewhere,considerably in excess of the resources of the committee itself.□

REPORT OF THE DIRECTOR OF NURSING

MISS M. GENEVA PURCELL

The year 1966 was a year of challenge and opportunity for the Department of Nursing. The many unique services provided by the University of Alberta Hospital emphasize the need for nursing practitioners to personalize and integrate the services provided by all diciplines. This task has been shared by 463 graduate nurses, 158 nursing aides, 137 ward aides and clerks and 108 nursing orderlies within the departments of Nursing Service and Nursing Education.

During the year 1966 all nursing station renovations were completed, an Isolation Unit was established, and the Emotionally Disturbed Childern's Unit was studied for the purpose of re-defining objectives and establishing improved channels of communication. Improvements in the utilization of staff were realized in the combining of the Central Supply Room and the Equipment Depot and in the amalgamation of the Housekeeping and Ward Aide Services.

The opening of the Coronary Care Unit on Station 41 and the retaining of a Clinical Supervisor for the Cardiac Surgical Unit provided the facilities and leadership needed for exemplary nursing care in these areas. A Constant Care Unit was established on Nursing Station 66, with it being noted that the hours of constant care nursing provided increased by 140% over the same period in 1965. Referrals to the Victorian Order of Nurses provided follow-through care that assisted many patients in adjusting to health problems. The Nursing Reserve provided over 46,000 hours of nursing care during the year. The Department of Nursing shared in the stimulation of developing and assisting in educational programs for graduate and undergraduate nurses as well as other related health disciplines. During the past year, over one hundred and eighty students were enrolled in the University of Alberta Hospital School of Nursing, bringing the total enrollment to just over four hundred and eighty students. Special programs in medication administration, care of patients on central venous pressure, resuscitation and cardiology were conducted with active participation from the staff. Two complete programs for Nursing Orderlies were successfully completed.

The Nursing Staff continues to show a keen interest in professional development with over one hundred and forty members of the staff enrolling in educational programs. The organization of a post graduate program in Operating Room Techniques and Management has been completed and has been extremely well received. Field work experience has been provided for University of Alberta students in Public Health Nursing, in Advanced Obstetrics and in Teaching and Supervision.

The Department of Nursing looks forward to the opportunities presented in the year ahead. The vision of a Health Sciences Centre provides a challenge that will see Nursing not only playing a significant role in providing professional leadership within our own discipline but also in assisting to integrate the many services provided by other disciplines.□

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